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FAX COVER SHEET

FAX NUMBER TRANSMITTED TO: (703) 308-0758

To: Examiner Peter Nerbun
Of: U.S. Patent and Trademark Office
From: Rosenbaum & Associates, P.C.
Client/Matter: 6006-023
Date: August 27, 2003

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DOCUMENTS	NUMBER OF PAGES*
Fax Transmittal	1
Amendment Transmittal (3 pages in duplicate)	6
Amendment and Response to Office Action	8
TOTAL	15

COMMENTS: In re: U.S. Serial No. 09/853,985
Applicant: Denes Marton
Attorney Dkt No. 6006-023

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PATENT**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Docket No. 6006-023

In re application of: Denes Marton

Serial No.: 09/853,985

Group No.: 3765

Filed: May 11, 2001

Examiner: P. Nerbun

For (title): SELF-SUPPORTING LAMINATED FILMS, STRUCTURAL MATERIALS AND MATERIALS AND MEDICAL DEVICES MANUFACTURED THEREFROM AND METHOD OF MAKING SAME

Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for the above-identified patent application.

2. Applicant is

☒ a small entity -- verified statement:

☐ attached
☒ already filed.

☐ other than a small entity.

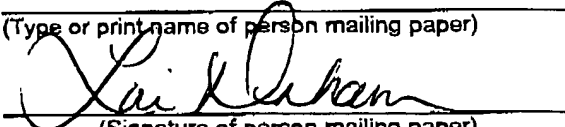
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CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this paper (along with any referred to as being attached or enclosed) are being facsimile transmitted to the United States Patent and Trademark Office on this date August 27, 2003, addressed to the: Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450, ATTN: Examiner Peter Nerbun at (703) 308-0758.

Lori Dunham

(Type or print name of person mailing paper)



(Signature of person mailing paper)

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. §1.136 apply.

- (a) Applicant petitions for an extension of time under 37 C.F.R. §1.136, with the following fees being payable under 37 C.F.R. §1.17(a)-(d) for the number of months checked below:

Extension	Fee for other than Small Entity	Fee for Small Entity
<input checked="" type="checkbox"/> One Month	\$110.00	\$55.00
<input type="checkbox"/> Two months	\$380.00	\$205.00
<input type="checkbox"/> Three months	\$870.00	\$465.00
<input type="checkbox"/> Four Months	\$1,360.00	\$725.00

Fee: \$ 55.00

- (b) An extension for _____ months has already been secured and the fee paid therefor of \$ _____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request: \$ 55.00

- (c) Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. §1.16b)-(d)) has been calculated as shown below:

Claims Remaining After Amendment	Highest No. Paid For	Number Extra	Rate Small Entity	or	Rate Other	Addit. Fee
Total	21	25	0	X \$ 9.00	\$18.00	\$ 0.00
Independent	4	5	0	X \$ 42.00	\$84.00	\$ 0.00
Multiple dependent claim(s), if any		0	X \$140.00		\$280.00	\$ 0.00
Filing Fee Calculation						\$ 0.00

5. Fee Payment Being Made At this Time

Total fees enclosed \$55.00

6. Method of Payment of Fees

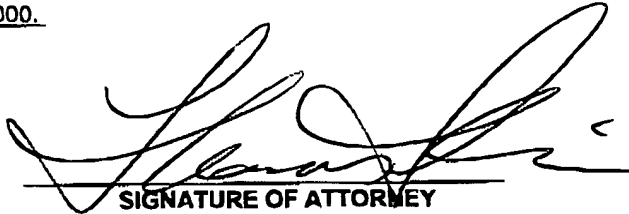
- ☐ check in the amount of \$
- ☒ charge Account No. 18-2000 in the amount of \$ 55.00. A duplicate of this transmittal is attached.
- ☒ The Commissioner is hereby authorized to charge any deficiency in the enclosed fees to Deposit Account No. 18-2000. A duplicate copy of this paper are enclosed.

7. Instructions As to Overpayment

- ☒ credit Account No. 18-2000.
- ☐ refund

Reg. No. 51,009

Tel. No. (312) 397-0303


SIGNATURE OF ATTORNEY

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